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FEC FORM 2

STATEMENT OF CANDIDACY

=											
1.	(a) Name of Candidate (in full)										
	Baugh, Scott, , ,										
	(b) Address (number and street) 4040 Macarthur Boulevard Suite 200	☐ Check if address changed				Candidate's FEC Identification Number H2CA47196					
	(c) City, State, and ZIP Code					3. Is This	Nev	V			nded
	Newport Beach		CA	9266	0	Statem	ent (N)	OR	- 1	x (A)	
4.	Party Affiliation	5. Office Soug	ht		6. State & Dist	rict of Candid	ate				
	REPUBLICAN PARTY	House			CA	47					
	DE	SIGNATIO	N OF PR	INCIPAL	CAMPAIGI	N COMMI.	TTEE				
7.	I hereby designate the following nar	ned political co	mmittee as m	y Principal (Campaign Comi		2022 (year of election		tion(s).	
	NOTE: This designation should be f	iled with the ap	propriate offic	ce listed in th	ne instructions.						
	(a) Name of Committee (in full)										
	Scott Baugh for Cor	igress									
	(b) Address (number and street)										
	4040 Macarthur Boulevard										
	Suite 200										
	(c) City, State, and ZIP Code										
	Newport Beach				CA	92660					
	DE	SIGNATIO	N OF OTI	HER AU	THORIZED	COMMIT.	TEES				
					_						
		(Including Join	t Fundraisin	g Representativ						
8.	I hereby authorize the following nam	·	-		g Representativ	res)	ceive and expe	end fund	s on l	oehalf of	my
	I hereby authorize the following nam candidacy.	·	-		g Representativ	res)	ceive and expe	end fund	s on l	pehalf of	my
	candidacy.	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on l	pehalf of	my
		ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on l	oehalf of	my
	candidacy.	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	pehalf of	my
	candidacy. NOTE: This designation should be find the finding of the committee (in full)	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	pehalf of	my
	candidacy. NOTE: This designation should be f	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on l	pehalf of	my
	candidacy. NOTE: This designation should be formula in the following should be formula in the formula in	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	pehalf of	my
	candidacy. NOTE: This designation should be formula to the following should be formulated (in full) Scott Baugh Victory	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	oehalf of	my
	candidacy. NOTE: This designation should be formula in the following should be formula in the formula in	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	oehalf of	my
	candidacy. NOTE: This designation should be formula in the following should be formula in the formula in	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	oehalf of	my
	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) Scott Baugh Victory (b) Address (number and street) PO Box 730	ned committee,	which is NO	T my principa	g Representativ	res)	ceive and expe	end fund	s on I	pehalf of	my
	candidacy. NOTE: This designation should be five and should be five a	ned committee,	which is NO	T my principa	g Representativ al campaign cor ee.	res)	ceive and expe	end fund	s on l	pehalf of	my
	candidacy. NOTE: This designation should be five and should be five a	ned committee,	which is NO	Γ my principa	g Representatival campaign coree.	es) mmittee, to rec				oehalf of	my
	candidacy. NOTE: This designation should be five five five five five five five fiv	ned committee,	which is NO	Γ my principa	g Representatival campaign coree.	95324				oehalf of	my
Siç	candidacy. NOTE: This designation should be fi (a) Name of Committee (in full) Scott Baugh Victory (b) Address (number and street) PO Box 730 (c) City, State, and ZIP Code Hilmar I certify that I have example of Candidate	ned committee,	which is NO	Γ my principa	g Representatival campaign coree.	es) mmittee, to rec				pehalf of	my
Siç	candidacy. NOTE: This designation should be five five five five five five five fiv	ned committee,	which is NO	T my principality my principality for the best of a	g Representatival campaign coree.	95324 and belief it is Date	true, correct a			pehalf of	my
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES

	(Including Joint Fundraising Representatives)							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	Take Back the House California 2022							
	(b) Address (number and street) PO Box 30844							
	(c) City, State, and ZIP Code							
	Bethesda CA 20824							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							
8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	(b) Address (number and street)							
	(c) City State and ZIP Code							